Exhibit 2

18-23538-shl Doc 3076-2 Filed 04/08/19 Entered 04/08/19 14:54:15 Exhibit 2 Pg 2 of 2

		Michigan Department of	State - Uniform Commercial Co	de					
		Document Number:							
UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS		2014178469-6 Filing Date and Time: 12/16/2014 3:36:10 PM							
					A. NAME & PHONE OF CONTACT AT FILER (optional) Noah Scooler		(This document was filed electronically.)		
					B. E-MAIL CONTACT AT FILER (optional)				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	_								
Graubard Miller	1								
Graubard Miller									
405 Lexington Avenue - Floor 11	,								
New York NY	10174 THE AB	OVE SDACE IS EC	R FILING OFFICE USE	ONLY					
DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use e: name will not fit in line 1b, leave all of item 1 blank, check here and and 1a. ORGANIZATION'S NAME KMart Corporation	xact, full name; do not omit, modify, or abbreviate f provide the Individual Debtor information in item 1								
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX					
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY					
3333 Beverly Road	Hoffman Estates	IL	60179	USA					
2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		NAL NAME(S)/INITIAL(S)	SUFFIX					
OR 2b. INDIVIDUAL'S SURNAME 2c. MAILING ADDRESS	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S) POSTAL CODE	SUFFIX					
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE						
20. INDIVIDUAL'S SURNAME	CITY OR SECURED PARTY): Provide only one Secured	STATE	POSTAL CODE						
26. INDIVIDUAL'S SURNAME 2c. MAILING ADDRESS 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNEE)	CITY OR SECURED PARTY): Provide only one Secured	STATE	POSTAL CODE						
2c. MAILING ADDRESS 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNCE STATE OF ASSIGNEE OF ASS	CITY OR SECURED PARTY): Provide only one Secured	STATE	POSTAL CODE	COUNTRY					
26. INDIVIDUAL'S SURNAME 26. MAILING ADDRESS 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE OF ASSIGNE	CITY OR SECURED PARTY): Provide only one Secured FIRST PERSONAL NAME CITY Norwalk	STATE I Party name (3a or 3b	POSTAL CODE NAL NAME(S)/INITIAL(S)	COUNTRY					
2c. MAILING ADDRESS 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNE 3a. ORGANIZATION'S NAME Royal Consumer Products LLC OR 3b. INDIVIDUAL'S SURNAME 3c. MAILING ADDRESS 108 Main Street	CITY Provide only one Secured FIRST PERSONAL NAME CITY Norwalk	ADDITIO	POSTAL CODE NAL NAME(S)/INITIAL(S) POSTAL CODE	COUNTRY					
2c. MAILING ADDRESS 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNE 3a. ORGANIZATION'S NAME Royal Consumer Products LLC OR 3b. INDIVIDUAL'S SURNAME 3c. MAILING ADDRESS 108 Main Street 4. COLLATERAL: This financing statement covers the following collatera Poster board, foam board and project board products an	CITY Provide only one Secured FIRST PERSONAL NAME CITY Norwalk	STATE ADDITIO STATE CT s thereof.	POSTAL CODE NAL NAME(S)/INITIAL(S) POSTAL CODE	COUNTRY SUFFIX COUNTRY USA					
2c. MAILING ADDRESS 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNE 3a. ORGANIZATION'S NAME Royal Consumer Products LLC OR 3b. INDIVIDUAL'S SURNAME 3c. MAILING ADDRESS 108 Main Street 4. COLLATERAL: This financing statement covers the following collatera Poster board, foam board and project board products an	CITY FIRST PERSONAL NAME CITY Norwalk It: Ind similar products thereto and proceed	STATE ADDITIO STATE CT S thereof.	POSTAL CODE NAL NAME(S)/INITIAL(S) POSTAL CODE 06851	COUNTRY SUFFIX COUNTRY USA					
2c. MAILING ADDRESS 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNE 3a. ORGANIZATION'S NAME Royal Consumer Products LLC OR 3b. INDIVIDUAL'S SURNAME 3c. MAILING ADDRESS 108 Main Street 4. COLLATERAL: This financing statement covers the following collatera Poster board, foam board and project board products an	CITY FIRST PERSONAL NAME CITY Norwalk a: nd similar products thereto and proceed	STATE ADDITIO STATE CT S thereof.	POSTAL CODE NAL NAME(S)/INITIAL(S) POSTAL CODE 06851	SUFFIX COUNTRY USA at Representative one box:					